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CONFIRMATION NO. 4868

SERIAL NUMBER 10/521,030	FILING OR 371(c) DATE 09/29/2005 RULE	CLASS 606	GROUP ART UNIT 3739	ATTORNEY DOCKET NO. 05799.0158USWO
APPLICANTS Casper Dolleris, Vancouver, CANADA;				
** CONTINUING DATA ***** This application is a 371 of PCT/DK03/00489 07/11/2003				
** FOREIGN APPLICATIONS ***** UNITED STATES OF AMERICA 60394859 07/11/2002				
** SMALL ENTITY **				
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged _____ Examiner's Signature _____ Initials _____		STATE OR COUNTRY CANADA	SHEETS DRAWING 8	TOTAL CLAIMS 84
				INDEPENDENT CLAIMS 3
ADDRESS 23552				
TITLE Handpiece for tissue treatment				
FILING FEE RECEIVED 2115	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	